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CONFIRMATION NO. 2632

<b>SERIAL NUMBER</b> 10/790,888	<b>FILING OR 371(c) DATE</b> 03/01/2004 <b>RULE</b>	<b>CLASS</b> 514	<b>GROUP ART UNIT</b> 1654	<b>ATTORNEY DOCKET NO.</b> 85189-5800
<b>APPLICANTS</b> Uri Wormser, Jerusalem, ISRAEL;				
<b>** CONTINUING DATA *****</b> This application is a CON of PCT/IL02/00713 08/29/2002				
<b>** FOREIGN APPLICATIONS *****</b> ISRAEL IL145181 08/29/2001				
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED** SMALL ENTITY **</b> ** 08/16/2004				
Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions met <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance		<b>STATE OR COUNTRY</b> ISRAEL	<b>SHEETS DRAWING</b> 8	<b>TOTAL CLAIMS</b> 35
Verified and Acknowledged <i>Michael Bradley</i> <i>MB</i> Examiner's Signature Initials		<b>INDEPENDENT CLAIMS</b> 2		
<b>ADDRESS</b> 28765				
<b>TITLE</b> Protective factors against inflammation, burns and noxious stimuli				
<b>FILING FEE RECEIVED</b> 985	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	